

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE			
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1	✓						51				
2		✓					52				
3	✓						53				
4		✓					54				
5		✓					55				
6		✓					56				
7		✓					57				
8		✓					58				
9		✓					59				
10		✓					60				
11		✓					61				
12		✓					62				
13		✓					63				
14		✓					64				
15		✓					65				
16		✓					66				
17		✓					67				
18		✓					68				
19		✓					69				
20		✓					70				
21		✓					71				
22		✓					72				
23		✓					73				
24		✓					74				
25		✓					75				
26		✓					76				
27		✓					77				
28		✓					78				
29		✓					79				
30		✓					80				
31		✓					81				
32		✓					82				
33		✓					83				
34		✓					84				
35		✓					85				
36		✓					86				
37		✓					87				
38		✓					88				
39		✓					89				
40		✓					90				
41		✓					91				
42		✓					92				
43		✓					93				
44		✓					94				
45		✓					95				
46		✓					96				
47		✓					97				
48		✓					98				
49		✓					99				
50		✓					100				
TOTAL IND.							TOTAL IND.				
TOTAL DEP.							TOTAL DEP.				
TOTAL CLAIMS							TOTAL CLAIMS				